



April 23, 2007

Ms. Grissel V. Diaz-Cotto  
Emergency and Remedial Response Division  
United States Environmental Protection Agency  
Region II  
290 Broadway, 19<sup>th</sup> Floor  
New York, NY 10007-1866

Re: March 2007 Discharge Monitoring Report  
Leachate Treatment Plant, Operable Unit 1  
Kin-Buc Landfill Superfund Site

Dear Ms. Diaz-Cotto:

The March 2007 Discharge Monitoring Report (DMR) for the Leachate Treatment Plant of Operable Unit 1, Kin-Buc Landfill Superfund Site, prepared by Veolia Water North America is attached.

Should you have any questions concerning the DMR or other site items, please contact me at your earliest convenience at the Kin-Buc site.

Very truly yours,  
Veolia Water North America  
On behalf of SCA Services, Inc.,

A handwritten signature in black ink, appearing to read "Glenn Grieb", written over the typed name.

Glenn Grieb  
Plant Manager

Enclosure

cc: Martha Goodwin – NJDEP  
Stephen Joyce – SCA Holding  
Carl Januszkiewicz – Waste Management  
Richard Hoyt – Veolia Water North America

Veolia Water North America  
Kinbuc Landfill  
383 Meadow Road, Edison, NJ 08817  
Tel. No. (732) 572-4743 / (732) 572-3871  
Fax. No. (732) 572-6294  
E-mail: [glenn.grieb@veoliawaterna.com](mailto:glenn.grieb@veoliawaterna.com)

562155



NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION  
DIVISION OF WATER QUALITY

MONITORING REPORT - TRANSMITTAL SHEET

NJPDES NO.  
\*NJ Permit Equivalent

REPORTING PERIOD  
M o. Y r.      M o. Y r.  
0 3 0 7      0 3 0 7

PERMITTEE:      Name:      SCA Services, Inc.  
Address:      383 Meadow Road  
                    Edison, New Jersey 08817

FACILITY:      Name:      Kin-Buc Landfill  
Address:      383 Meadow Road  
                    Edison, New Jersey 08817  
Telephone:      732-572-4743

FORMS ATTACHED (Indicate Quantity of Each)

Operating Exceptions

SLUDGE REPORT-SANITARY  
\_\_ T-VWX-007 \_\_ T-VWX-008 \_\_ T-VWX-009  
\_\_ EPA Form 3320-1

SLUDGE REPORT-INDUSTRIAL  
\_\_ T-VWX-010A \_\_ T-VWX-010B

WASTEWATER REPORTS  
\_\_ T-VWX-011 \_\_ T-VWX-012 \_\_ T-VWX-013

GROUNDWATER REPORTS  
\_\_ T-VWX-015(A,B) \_\_ T-VWX-016 \_\_ T-VWX-017  
\_\_ ELECTRONIC SUBMISSION

	YES	NO
DYE TESTING	__	<u>X</u>
TEMPORARY BYPASSING	__	<u>X</u>
DISINFECTION INTERRUPTION	__	<u>X</u>
MONITORING MALFUNCTIONS	__	<u>X</u>
UNITS OF OPERATION	__	<u>X</u>
OTHER	__	<u>X</u>

NPDES DISCHARGE MONITORING  
1 EPA Form 3320-1

(Detail any "Yes" on reverse side in appropriate space.)

NOTE: The "Hours Attended at Plant" on the reverse of this sheet must also be completed.

AUTHENTICATION I certify under penalty of law that this document and all attachments were prepared under the direction or supervision in accordance with a system designed to assure my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

LICENSED OPERATOR

PRINCIPAL EXECUTIVE OFFICER OR  
DULY AUTHORIZED REPRESENTATIVE

Name (Printed)      Glenn Grieb  
Grade & Registry No.      N-4 ; 002212  
Signature      *Glenn Grieb*

Name (Printed)      Glenn Grieb  
Title (Printed)      Plant Operations Manager  
Signature      *Glenn Grieb*

Date April 23, 2007

Date April 23, 2007

OPERATING EXCEPTIONS DETAILED

During the month we received results for phenanthrene that exceeded our maximum limit for the parameter. This result of 32ug/l was 3 magnitudes greater than any previous weekly sampling event for the month of March. The april results for phenanthrene were well below the permitted limit. Actually the normal result for this parameter is closer to the method detection limit than our discharge limit.

During the month we did not see a change in the other semi voa's? There were no changes to the operation that would lead to a issue.

This leads me to conclude that this was a lab or sampling error.

HOURS ATTENDED AT PLANT

MONTH 03 YEAR 07

**Day of Month**

Licensed Operator

Others

**Day of Month**

Licensed Operator

Others

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
9	8	0	0	0	0	0	0	0	0	0	8	8	9	10	8
8	8	16	6	8	8	8	8	12	4	4	8	8	8	8	8
17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
0	0	10	10	9	8	0	0	0	0	0	0	0	8	8	
4	6	8	8	8	8	8	4	4	8	8	8	12	8	16	

PERMITTEE NAME/ADDRESS  
NAME  
ADDRESS

SCA SERVICES, INC.  
383 MEADOW ROAD  
EDISON, NEW JERSEY 08817

FACILITY  
LOCATION

KIN-BUC LANDFILL  
EDISON, NEW JERSEY  
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM  
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT			001		
PERMIT NUMBER			DISCHARGE NUMBER		
MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
07	03	01	07	03	31

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.025745	0.033656	MGD	*****	*****	*****	***	***	continuous	flow meter
	PERMIT REQUIREMENT	REPORT	ONLY		*****	*****	*****			continuous	flow meter
pH	SAMPLE MEASUREMENT	*****	*****	***	7.42	*****	7.69	S.U.	0	1/week	grab
	PERMIT REQUIREMENT	*****	*****		8.0	*****	9.0			weekly	grab
PETROLEUM HYDROCARBONS	SAMPLE MEASUREMENT	*****	*****	***	*****	<1.000	<1.000	mg/l	0	2/month	grab
	PERMIT REQUIREMENT	*****	*****		*****	10	15			2/month	grab
COD	SAMPLE MEASUREMENT	16.73	17.67	kg/day	*****	171	182	mg/l	0	2/month	comp.
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT	ONLY			2/month	comp.
BOD	SAMPLE MEASUREMENT	*****	*****	***	*****	<5.00	<5.00	mg/l	0	2/month	comp.
	PERMIT REQUIREMENT	*****	*****		*****	56	220			2/month	comp.
TOTAL SUSPENDED SOLIDS	SAMPLE MEASUREMENT	0.42	0.69	kg/day	*****	4.60	6.00	mg/l	0	1/week	comp.
	PERMIT REQUIREMENT	REPORT	ONLY		*****	30	45(1)			weekly	comp.
DISSOLVED OXYGEN	SAMPLE MEASUREMENT	*****	*****	***	7.88	*****	*****	mg/l	0	1/week	grab
	PERMIT REQUIREMENT	*****	*****		4.0 MIN Instantaneous	*****	*****			weekly	grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)					TELEPHONE		DATE		
Glenn Grieb Project Manager							732 572-4743		07 04 23		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR MO DAY		

COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS

(REFERENCE ALL ATTACHMENTS HERE)

PERMITTEE NAME/ADDRESS

NAME  
ADDRESS


SCA SERVICES, INC.  
383 MEADOW ROAD  
EDISON, NEW JERSEY 08817

FACILITY  
LOCATION  
ATTN:

KIN-BUC LANDFILL  
EDISON, NEW JERSEY  
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM  
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT PERMIT NUMBER			001 DISCHARGE NUMBER		
MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
07	03	01	07	03	31

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BENZENE	SAMPLE MEASUREMENT	<0.0000198	<0.0000199	kg/day	*****	0.20	0.20	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.009	0.02		*****	57	134			2/month	grab
CHLOROBENZENE	SAMPLE MEASUREMENT	<0.0000198	<0.0000199	kg/day	*****	<0.20	<0.20	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.022	0.058		*****	142	380			2/month	grab
1,1 DICHLOROETHENE	SAMPLE MEASUREMENT	<0.0000295	<0.0000298	kg/day	*****	<0.30	<0.30	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.003	0.009		*****	22	59			2/month	grab
ETHYLBENZENE	SAMPLE MEASUREMENT	<0.0000393	<0.0000397	kg/day	*****	<0.40	<0.40	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.022	0.058		*****	142	380			2/month	grab
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT	<0.0000393	<0.0000397	kg/day	*****	<0.40	<0.40	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.008	0.025		*****	82	184			2/month	grab
TOLUENE	SAMPLE MEASUREMENT	<0.0000295	<0.0000298	kg/day	*****	<0.30	<0.30	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.004	0.011		*****	28	74			2/month	grab
1,2-TRANSDICHLOROETHYLENE	SAMPLE MEASUREMENT	<0.0000393	<0.0000397	kg/day	*****	<0.40	<0.40	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.004	0.009		*****	85	80			2/month	grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)				 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
Glenn Grieb Project Manager								732 572-4743		07 04 22	
TYPED OR PRINTED						AREA CODE		NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS

(REFERENCE ALL ATTACHMENTS HERE)

PERMITTEE NAME/ADDRESS

NAME  
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SCA SERVICES, INC.  
383 MEADOW ROAD  
EDISON, NEW JERSEY 08817

FACILITY  
LOCATION  
ATTN:

KIN-BUC LANDFILL  
EDISON, NEW JERSEY  
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM  
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT			001			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
07	03	01		07	03	31

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TRICHLOROETHYLENE	SAMPLE MEASUREMENT	<0.0000393	<0.0000397	kg/day	*****	<0.40	<0.40	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.004	0.010		*****	26	88			2/month	grab
VINYL CHLORIDE	SAMPLE MEASUREMENT	<0.0000179	<0.0000199	kg/day	*****	<0.20	<0.20	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	0.008	0.018		*****	52.8	108			weekly	grab
ACENAPHTHYLENE	SAMPLE MEASUREMENT	<0.0000098	<0.0000099	kg/day	*****	<0.100	<0.100	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
BENZO(A)ANTHRACENE	SAMPLE MEASUREMENT	<0.0000054	<0.0000056	kg/day	*****	<0.05	<0.06	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
BENZO(A)PYRENE	SAMPLE MEASUREMENT	<0.0000084	<0.0000087	kg/day	*****	<0.065	<0.067	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
BENZO(ghi)PERYLENE	SAMPLE MEASUREMENT	<0.0000096	<0.0000099	kg/day	*****	<0.098	<0.099	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
BENZO(k)FLUORANTHENE	SAMPLE MEASUREMENT	<0.0000096	<0.0000099	kg/day	*****	<0.098	<0.100	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)				 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
Glenn Grieb Project Manager								732 572-4743		07 04 23	
TYPED OR PRINTED						AREA CODE		NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS

(REFERENCE ALL ATTACHMENTS HERE)  
<0.00017

PERMITTEE NAME/ADDRESS

NAME

ADDRESS

SCA SERVICES, INC.  
383 MEADOW ROAD  
EDISON, NEW JERSEY 08817

FACILITY

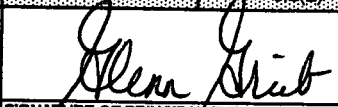
LOCATION

ATTN:

KIN-BUC LANDFILL  
EDISON, NEW JERSEY  
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM  
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT			001			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
07	03	01		07	03	31

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
IDENO(1,2,3cd) PYRENE	SAMPLE MEASUREMENT	<0.0000085	<0.0000088	kg/day	*****	<0.087	<0.089	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
PHENANTHRENE	SAMPLE MEASUREMENT	<0.0005315	<0.0021012	kg/day	*****	8.1	32.0	ug/L	1	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	5.4(2)			weekly	grab
ALDRIN	SAMPLE MEASUREMENT	<0.0000010	<0.0000010	kg/day	*****	<0.01	<0.01	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.000133	0.00026		*****	0.0875	0.176			monthly	grab
4,4-DDT	SAMPLE MEASUREMENT	<0.0000007	<0.0000010	kg/day	*****	<0.008	<0.01	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	0.0000578	0.000146		*****	0.38	0.765			weekly	grab
PCB-1242	SAMPLE MEASUREMENT	<0.0000268	<0.0000298	kg/day	*****	<0.30	<0.30	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab
PCB-1248	SAMPLE MEASUREMENT	<0.0000268	<0.0000298	kg/day	*****	<0.30	<0.30	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab
PCB-1254	SAMPLE MEASUREMENT	<0.0000268	<0.0000298	kg/day	*****	<0.30	<0.30	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
Glenn Grieb Project Manager								732   572-4743		07   04   23	
TYPED OR PRINTED						AREA CODE		NUMBER		YEAR MO DAY	
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS		(REFERENCE ALL ATTACHMENTS HERE)									

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EDISON, NEW JERSEY 08817

FACILITY  
LOCATION  
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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM  
DISCHARGE MONITORING REPORT

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PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PCB-1260	SAMPLE MEASUREMENT	<0.0000179	<0.0000199	kg/day	*****	<0.20	<0.20	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab
ARSENIC	SAMPLE MEASUREMENT	0.0003919	0.0005030	kg/day	*****	4.30	5.30	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.043	0.028		*****	85.4	172			weekly	comp
CADMIUM	SAMPLE MEASUREMENT	<0.0000357	<0.0000397	kg/day	*****	<0.40	<0.40	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.0073	0.017		*****	48.2	152			weekly	comp
CHROMIUM	SAMPLE MEASUREMENT	0.0003849	0.0004769	kg/day	*****	4.25	4.80	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.630	0.080		*****	198	308			weekly	comp
COPPER	SAMPLE MEASUREMENT	0.0003568	0.0003988	kg/day	*****	4.0	4.2	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	10			weekly	comp
LEAD	SAMPLE MEASUREMENT	0.0002410	0.0002883	kg/day	*****	2.70	2.70	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	10			weekly	comp
NICKEL	SAMPLE MEASUREMENT	0.0028584	0.0033184	kg/day	*****	31.9	33.4	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.140	0.281		*****	924	1850			weekly	comp
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years).					TELEPHONE		DATE		
Glenn Grieb Project Manager							732 572-4743		07 04 23		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR MO DAY		

COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS

(REFERENCE ALL ATTACHMENTS HERE)



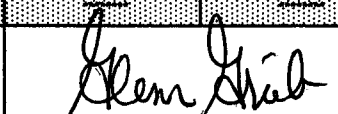
PERMITTEE NAME/ADDRESS  
NAME  
ADDRESS

FACILITY  
LOCATION  
ATTN:

SCA SERVICES, INC.  
383 MEADOW ROAD  
EDISON, NEW JERSEY 08817  
  
KIN-BUC LANDFILL  
EDISON, NEW JERSEY  
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM  
DISCHARGE MONITORING REPORT

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PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
ZINC	SAMPLE MEASUREMENT	0.0012252	0.0019811	kg/day	*****	13.4	20.4	ug/L	0	1/week	comp	
	PERMIT REQUIREMENT	0.177	0.358		*****	1170	2350			weekly	comp	
CYANIDE	SAMPLE MEASUREMENT	<0.0008928	<0.009935	kg/day	*****	<10.0	<10.0	ug/L	0	1/week	comp	
	PERMIT REQUIREMENT	0.902	9.094		*****	13.2	26.4			weekly	comp	
ALUMINUM	SAMPLE MEASUREMENT	0.005587	0.0082195	kg/day	*****	62.6	62.6	ug/L	0	1/week	comp	
	PERMIT REQUIREMENT	540	2.81		*****	9240	18500			weekly	comp	
IRON	SAMPLE MEASUREMENT	0.0077383	0.0108307	kg/day	*****	82.7	107.0	ug/L	0	1/week	comp	
	PERMIT REQUIREMENT	89.6	182		*****	532000	1070000			weekly	comp	
ACUTE TOXICITY, (LC50)	SAMPLE MEASUREMENT	QUARTELY	REPORT	***	>100	*****	*****	%	0			
	PERMIT REQUIREMENT	*****	*****		50(3)	*****	*****			see permit	equivalent	
Ammonia	SAMPLE MEASUREMENT	*****	*****	***	*****	<0.155	<0.210	mg/l	0	*****	*****	
	PERMIT REQUIREMENT	*****	*****		*****	4.8	18.0			2/month	comp	
	SAMPLE MEASUREMENT	*****	*****	***	*****	*****	*****	***	***	*****	*****	
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****			*****	*****	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)				 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE		
Glenn Grieb Project Manager								732	572-4743	07	04	23
TYPED OR PRINTED						AREA CODE		NUMBER		YEAR	MO	DAY
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS		(REFERENCE ALL ATTACHMENTS HERE)										